## Town of Concord Comparison of Benchmark to HSA-Qualified Plans Employee Costs & Exposure Fallon Select — Family Coverage

The following chart compares the fixed costs and total exposure of the Benchmark and HSA-Qualified plans. Employees are encouraged to review plan documents, the only source on which coverage is based, when comparing plan costs.

Benchmark HMO	HSA-Qualified HMO			
Premiums – Fixed Costs				
You Pay: Annual Premium = <b>\$8,936</b>	You Pay: Annual Premium = \$7,110 And \$2,000 is contributed by Town to Employee's H	\$3,826 Saved!		
Total Exposure for Family				
\$8,936 Premium	\$7,110 Premium			
PLUS	PLUS			
No more than \$2,000 per person; \$4,000 per family for Medical & Rx Expenses combined via deductible (\$300 per person; \$900 for Family) & Copays, e.g.: > Hospital \$500 > Surgery \$250 > ER Visit \$100 > MRI or CT \$100 > Specialist \$45 > Primary Care \$20 > 30 Days Rx: \$10/\$30/\$65	No more than \$4,000 Medical Expenses and up to \$13,100 Medical + Rx Expenses combin After Med/Rx deductible, pay Rx copays ONLY, up to the \$13,100 max, e.g.:  > 30 Days Rx: \$10/\$30/\$65  > 90 Days Rx: \$25/\$75/\$165  MINUS  \$2,000 of Town-contributed HSA funds (but employee's HSA can't be used for children who aren't tax dependent)			

Please see Page 2 of this document for cost scenarios based on these plan provisions

## Cost Scenarios for Medical Services Fallon Select - Family Coverage

The following chart compares costs based on Benchmark and HSA-Qualified plan coverage for non-preventative medical services. Prescription costs are not included in these scenarios.

Employees are encouraged to review plan documents, the only source on which coverage is based, when comparing plan costs.

Benchmark HMO	HSA-Qualified HMO	d	
Premium = \$8,936 (Employee Cost)	Premium = \$7,110 (Employee (	Cost)	
Scenario #1: \$900 of Medical Se	ervices Incurred by 1 Family Member		
You Pay:	You Pay:		
Premium + \$300 deductible* + copays	Premium + \$0*	\$3,226 +	
= \$9,236 + copays	= \$7,110		
	* Use Town-contributed HSA funds to pay \$900 of deductible		
	\$1,100 remains in HSA accou	ınt	
Scenario #2: \$900 of Medical Se	rvices Incurred by 3 Family Members		
You Pay:	You Pay:		
Premium + \$900 deductible*	Premium + \$0*	\$3,826	
= \$9,836	= \$7,110		
	* Use Town-contributed HSA funds to pay \$900 of deductible		
	\$1,100 remains in HSA accou	ınt	
Scenario #3: \$2,000 of Medical S	Services Incurred by 1 Family Member		
You Pay:	You Pay:		
Premium + \$300 deductible* + copays	Premium + \$0*	\$2,126+	
= \$9,236 + copays	= \$7,110	\$2,120	
	* Use Town-contributed HSA funds to pay \$2,000 of dedu		
	\$0 remains in HSA account		
Scenario #4: \$2,000 of Medical S	ervices Incurred by 3 Family Members		
You Pay:	You Pay:		
Premium + \$900 deductible*+ copays	Premium + \$0*	\$2,726 +	
= \$9,836 + copays	= \$7,110	\$2,7261	
	* Use Town-contributed HSA funds to pay \$2,000 of deductibl		
	\$0 remains in HSA account		
Scenario #5: \$4,000 of Medical S	Services Incurred by 1 Family Member		
You Pay:	You Pay:		
Premium + \$300 deductible* + copays	Premium + \$2,000*	\$126 to \$1,826	
= \$9,236 + copays	= \$9,110		
	* Use Town-contributed HSA funds to pay \$2,000 of deductible;		
	\$0 remains in HSA account	•	
Pay no more than \$2,000 medical per person,	Medical services covered in full after \$4,000 paid,		
Premium + Medical Max = \$10,936	Premium + Medical Max = \$9,110		

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You Pay:	You Pay:		
Premium + \$900 deductible*+ copays	Premium + \$2,000*	\$726 to \$3,826	
= \$9,836 + copays	= \$9,110		
	* Use Town-contributed HSA funds to pay \$2,000 of deductible; \$0 remains in HSA account		
Pay no more than \$4,000 medical per family,  Premium + Medical Max = \$12,936	Medical services covered in full after \$4,000 paid, Premium + Medical Max = \$9,110		
* Deductible = \$300 per person w/max of \$900 per			

<sup>\*</sup> Deductible = \$300 per person w/max of \$900 per family; doesn't apply to routine office visits

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